Poor Health Services in Jammu and Kashmir

1182. SHRI VIRENDRA KATARIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the health services in Jammu and Kashmir have become dismal with each passing day with State run hospitals and dispensaries failing to cater to the growing medical needs of the people; and

(b) what measures Government are taking to mitigate the sufferings of the people in the State of Jammu and Kashmir?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) and (b) Apart from the shortage of medical and para medical personnel in the Valley, no such failure of State Government Hospitals/Dispensaries in meeting the medical needs of the people has been reported.

Cases of AIDS in Eastern States

1183. SHRI BHAGABAN MAJHI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of AIDS cases reported from Eastern States and specifically from Southern Orissa;

(b) whether AIDS cases are on the increase in the Eastern States;

(c) if so, the reasons therefor; and

(d) the details of the steps being taken to check the spread of AIDS from those parts of Eastern States?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) 20 AIDS cases have been reported from West Bengal as on 30th June, 1994. From the States of Orissa and Bihar no AIDS case has been reported so far.

(b) and (c) With improvements in clinical diagnosis and reporting system, there have been more reports of AIDS cases from all over the country. Comparitively however, there are lesser reported cases of AIDS from the Eastern States.

(d) A comprehensive National AIDS Control Programme is currently under implementation throughout the country including Eastern States. The Programme consists of generation of awareness amongst risk behaviour groups and the general public, prevention and control of STD, promotion of condom use for prevention of STD, HIV Blood safety and rational use of blood and better facilities for surveillance, diagnosis and management of HIV/AIDS cases.

New vaccines for Leprosy, Malaria and AIDS

1184. SHRI SARADA MOHANTY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether some new vaccines have been developed to cure leprosy, malaria and AIDS;

(b) if so, the laboratories where these new kinds of vaccines have been developed; and

(c) the steps taken by Government to use such vaccines?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) No, Sir.

(b) and (c) Do not arise.

Social Safety Net Scheme

1185. SHRI RAMNATH KOVIND: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what are the main points of the Social Safety Net Scheme under which the States are given financial help with the cooperation of World Bank;

(b) in how many districts of Uttar Pradesh this scheme is proposed to be introduced; and

(c) how many hospitals, small or big, are likely to be opened in Kanpur and Kanpur Dehat Districts of U.P.?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) Under the Social Safety Net Scheme financial assistance is being given to 90 demographically weak districts of the country where Crude Birth Rate is more than 39 per thousand. In each of these districts 5 PHCs every year are being strengthened by provision of the following facilities:

(i) A well equipped operation theater.

(ii) A Labour room.

(iii) An observation ward heaving 6 beds.

(iv) Two quarters, one for Lady doctor and other for ANM/LHV.

(v) One generator to ensure continuous power supply.

(vi) Provision of water pump.

(vii) One ambulance per block if not already available.

(b) This scheme has been introduced in 32 districts of Uttar Pradesh. (List enclosed) as statement (*See* below).

(c) No new hospitals are intended to be set up in Kanpur or Kanpur Dehat.

Statement

Demographically weak districts of U.P.

UTTAR PRADESH

1. Farrukhabad
2. Pratapgarh
3. Mainpuri
4. Banda
5. Azamgarh
6. Shahjahanpur
7. Tehri Garhwal
8. Hardoi
9. Moradabad
10. Aligarh
11. Lalitpur
12. Pilibhit
13. Deoria
14. Bulandshahar
15. Gorakhpur
16. Badaun
17. Saharanpur
18. Sitapur
19. Basti
20. Sultanpur
21. Etah
22. Jaunpur
23. Agra
24. Bareilly
25. Gonda
26. Allahabad
27. Nainital
28. Meerut
29. Bijnor
30. Raebereli
31. Ghaziabad
32. Rampur

Medical Colleges at Manipal and Mangalore

1186. SHRI JAGDISH PRASAD MATHUR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the subjects approved by the Medical Council of India to be tanght at the Kasturba Medical College, Manipal (Karnataka) and at the Kasturba Medical College, Mangalore; and

(b) the number of students admitted in the above mentioned two colleges separately during the previous three academic years, year-wise?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) The graduate and post-graduate mé-